## Supplemental Application Data Sheet

Application Information

Application number::

10/598,048

International Filing Date::

02/17/05

Application Type::

Regular

Subject Matter::

Utility

Title::

Management Of Ophthalmologic Disorders, Including Macular Degeneration

Attorney Docket Number:: Total Drawing Sheets::

HMV-091.02 19

Small Entity?::

NIH

Licensed US Govt, Agency:: Contract or Grant Numbers::

R01-FY-04096

## Applicant Information

Applicant Authority Type::

Inventor US

Primary Citizenship Country:: Status::

Full Capacity

Given Name::

Robert R

Middle Name:: Family Name::

Rando

City of Residence:: State or Province of Residence:: Brookline

Country of Residence::

MA US

Street of mailing address::

65 Glen Road, Apt. # H-6

City of mailing address::

Brookline

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State or Province of mailing address::

MA 02445-7770 Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 58475

Supplemental 10598048 02/17/05 03/29/07

## Representative Information

Representative Customer Number::

58475

## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2005/004990	02/17/05
PCT/US2005/004990	An application claiming the benefit under 35 USC 119(e)	60/545,456	02/17/04
PCT/US2005/004990	An application claiming the benefit under 35 USC 119(e)	60/567,604	05/03/04
PCT/US2005/004990	An application claiming the benefit under 35 USC 119(e)	60/578,324	06/09/04